

Patient Engagement Annual Report

South Staffordshire Primary Care Trust is committed to engaging with patients and members of the public in the planning, development and delivery of local health services.

In doing so, the PCT goes some way towards fulfilling its duty outlined in Section 242 of the NHS Act 2006 and ensuring that its decisions are informed and influenced by the views and opinions of local people.

The PCT's legal obligation to engage was further enhanced in 2009 by the introduction of statutory guidance Real Accountability, which was produced by the Department of Health and requires all PCTs to report not only on any consultations carried out in regard to their commissioning decisions but also how the views and opinions of users given during a consultation have influenced those decisions.

The duty also requires the PCT to be responsible for reporting on consultations undertaken by NHS Trusts or NHS Foundation Trusts, that are independent of the PCT, but the outcome will influence the commissioning decisions of the PCT.

Consultations undertaken (or completed) by South Staffordshire PCT between 1st April 2009 and 31st April 2010

Consultation	Objective	Timescale	Methods used	Audience	Information provided	Changes in response to consultation	Feedback mechanisms
'Give us your views postcard'	To involve patients and public in design of postcard to encourage feedback on health services, including proposed distribution	June/July 2009	One-to-one via email - due to short timescale	Members of public recruited to Patient Engagement Database	Draft copies of postcard together with briefing on purpose of the project	Design of postcard was changed to take into account views received i.e. shorter text and change in colour An easy read format was also produced for vulnerable adults and children	Final version (complete with explanation as to why some views couldn't be addressed) was sent to all participants

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Burntwood Health & Wellbeing Centre	Formal consultation on relocation of 8 GP practices in Burntwood – to determine site of new buildings	August – November 2009	Questionnaires Patient groups Public meetings Interactive website Press releases Newsletter	Patients Public Partners (Local Authority, voluntary sector) Staff	Consultation document Questionnaire	Public feedback supported PCT's preferred option (59%)	Website Press releases Board report
Starfish	To ask patients and the public what kind of service they would like to see introduced to meet the needs of people with low-level mental health problems i.e. stress, anxiety	February – December 2009	Project board with patient and public representatives Groups Focus groups Drop-ins South Staffordshire Voice Newsletter	Patients Public GPs PCT staff Providers	Out-line Service Specification Minutes from project board Presentation from proposed provider	Chase Emotional Wellbeing Service was introduced in September 2009 taking into account the comments raised e.g. issues it could help people with Members of the public chose the name of the service	Project board Minutes Staff briefings

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Mid Staffs MIND	To establish the existing model of service delivery provided by Mid Staffs MIND and to obtain views on the service from service users and other interested parties	January – September 2010	Focus group Questionnaire	Patients currently using the service in Cannock and Stafford	Consultation document Face-face briefing Questionnaire	Initially commissioners questioned the value of the existing service but following the positive feedback from service users a revised model of service delivery will now be developed with further consultation to seek input from all stakeholders	Face-to-face
Seisdon Priorities	To establish a base-line of information around what local residents thought about existing health services and perceived gaps	October to December 2009	Questionnaire to a random sample of 4,500 patients	Patients registered with practices in the area	People were asked their views on 10 service areas and ranked their top four priorities	Findings were fed into the PBC work plan for 2010/2011	Press Annual Report website

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Lymphoedema	To seek patient views of existing Lymphoedema services and how they could be improved	August to October 2009	Focus groups	Service users Compton House	Information on services provided in other areas Proposed service specification for Seisdon's community model	A new community service was introduced, in partnership with Compton House, in March 2010. Previously patients had to go to Compton House for the specialised service	Members of the focus group were kept informed about progress made Local press Annual report
Your Guide to Health Services	Seek views from patients on the content of Your Guide, to assess readability and usefulness	October 09	Focus groups	Residents of Great Wyrley and Kinver	Residents were given last year's edition of Your Guide and asked, with the help of a large print guidance sheet, to comment on the content and readability. They were then asked for their views.	Residents were able to influence the layout and design	Directly to the residents

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Prison Health Trainers Programme	To produce marketing/promotional material for the Prison Health Trainer Programme	April 09	Focus groups of prisoners who had been on the programme and were accredited	Prisoners at Featherstone and Drake Hall Prisons	Marketing material for the generic programme	The wording needs to be kept simple to take account of the low literacy levels. Imagery to be realistic and reflective of prison environment. Identifiable space for each prison to brand their own programme. Pathway to access service is easy to understand for prisoners.	Copies of all literature made available to participants with the changes requested

PCT Consultations on-going (started since 1st April 2009)

Consultation	Objective	Timescale	Methods used	Audience	Information provided	Changes in response to consultations	Feedback mechanisms
Cannock Health Centre	To seek the views of GPs, patients and general members of the public on plans to re-locate four single-handed GP practices into a new purpose-built health centre	November 2008 -date	Project Board – with patient representatives Questionnaire to all patients registered with the four GP practices concerned Drop-in sessions Focus groups One-to-one discussion with patients and local residents	GPs Patients Public Partners i.e. Mid Staffs Hospital NHS Trust	Consultation document outlining the options available – including information on the PCT's preferred option and why (paper version and presentation at public meetings) Proposed service specification Outline plans Up-dates included in newsletter and via press	Following feedback from the consultation to date – a new option appraisal is now being developed	

Consultation	Objective	Timescale	Methods used	Audience	Information provided	Changes in response to consultation	Feedback mechanisms
Front ending A&E in Burton Hospital	To involve patients and the public in the development of a 'Hub' to support admission avoidance and improve discharge arrangements	On-going	Patient participation groups, District Groups	Patients and members of the public	Briefings and newsletters	To Patient Participation Groups via District Groups	Yet to be determined
QIPP (Quality and Productivity through Innovation)	To involve patients and the public in ways Trust can make savings	On-going	Patient Participation Groups	Patients Public	Summary of project (QIPP) and specifically around target areas i.e. medicines bill	Feedback being incorporated into future plans for pharmacy	
PCT website design	To seek views of local residents on redesigning the PCT website	May 2010	Focus groups	Students of Burton College and Penkridge Patient Participation Group	Briefing of objective	Participants were asked: What websites they used regularly and why they liked them? What websites didn't they like? What they saw as priorities on the PCT website? What they thought was needed on the website?	All input from the group was fed into the design stage, however, the website development programme is now on hold pending the outcome of the White Paper proposals.

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Care Outside of Hospital Programme	A rolling programme of engagement with patients and carers on the development of the programme, including in the early stages commissioning the Picker Institute to undertake a 'listening exercise' with patients, staff and clinicians on perceptions and feasibility of developing the programme	April 2008 – to date	Focus groups, one to one interviews, district patient groups, patient participation groups, presentations and workshops	Patients, carers, NHS community staff, GPs	Newsletters, summary documents, minutes of meetings	Patients and carers have so far been able to express their preferences for communication channels through the 'Hub' to the third sector. The focus groups have been able to take into account the strong view of carers, particularly in a crisis situation.	Newsletters, minutes of meetings, focus groups and workshops

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<p><u>Generic</u> 5 District Patient Groups have been set up which are made up of representatives of Practice level Patient Participation Groups across South Staffordshire</p>	<p>To ensure that patients and members of the public are continuously involved in the planning, development and delivery of health services commissioned through Practice based Commissioning</p>	<p>Ongoing</p>	<p>Presentations and discussions</p>	<p>Patients nominated from Patient Participation Groups</p>	<p>Individual briefings on PbC plans being worked on, supported by regular newsletters. Information is then cascaded to patient participation groups for wider engagement and discussion</p>	<p>Patients are able to influence a wide range of services at the planning stages, which feed into PbC proposals</p>	<p>A range of developments</p>
<p>Pharmaceutical Needs Assessment (PNA)</p>	<p>To seek views on the PNA during a formal consultation period</p>	<p>September -November 2010</p>	<p>Website Questionnaire, attending community groups</p>	<p>Patients Public Staff Providers Partners Patient Groups</p>	<p>Comms Plan Consultation document and questionnaire</p>	<p>Consultation document and questionnaire</p>	<p>Yet to be determined</p>

Consultations planned by the PCT for 2010/2011

Consultation	Objective	Timescale	Methods used	Audience	Information provided	Changes in response to consultation	Feedback mechanisms
Paediatric Palliative Care	To carry out a consultation exercise with parents and guardians of children with life threatening conditions on the standard of consultation when first diagnosed	Before end of March 2011	Small focus groups	Parents and guardians of children with life threatening conditions	Yet to be decided	Yet to be determined	Yet to be determined
Stroke Community Rehabilitation Services	One to one interviews with patients and carers with recent experiences of stroke community rehabilitation services		One-to-one interviews	Patients and carers	Verbal summary	Based on feedback from patients, PbC consortia decided not to go ahead with plans to develop a fully integrated community rehabilitation services, as patients were happy with services at hyper-acute and community hospitals stroke units and community based stroke services.	Letter to all participants advising of outcome.

PPI Report from the West Midlands Strategic Commissioning Group

The West Midlands Strategic Commissioning Group commissions specialised services on behalf of the 17 West Midlands Primary Care Trusts from over 60 providers, which are complex and sometimes difficult to understand. Specialised services are constantly developing and changing; new specialised services are introduced whilst other services become commonplace and cease to be specialised.

Project title	Secure Services Strategy 2010 - 2015	New Website for West Midlands Specialised Commissioning	Cystic Fibrosis
Lead WMSC contact	Phil Brian Head of Secure Services Commissioning West Midlands Specialised Commissioning Team	Chris Capewell Communications & Engagement Manager	Sarah Freeman West Midlands Specialised Commissioning Team
Date of consultation / engagement work (start date and end date if complete)	May 2009 – February 2010	August 2009 – December 2009	Commenced 2006. This is an ongoing exercise with patient engagement from its inception in 2009
Matter(s) relating to a commissioning decision – i.e. what were people asked to comment on?	The development of a Secure Services Strategy for the next five years to ensure people from the West Midlands with complex health needs have access to the most appropriate services at the right time and as close to home as possible at the right price	A small group of internet users was established to comment on the design, layout, ease of use and understanding of the new website for the West Midlands Specialised Commissioning Team	Future configuration of services for people with Cystic Fibrosis to provide safe, efficient and accessible services
What questions were asked and how? Include list of all formats if more than one used	Questionnaires, developed in partnership with services users, can be found in the Secure Services Strategy One for professionals/clinicians/organisations within secure services One for services users both past and present	Emails sent to website group asking them for: feedback: the website wireframe and site structure and content, layout and ease of use	Questionnaire around prioritisation of different elements of service provision to inform assessment of different options for service configuration.
What information was given to those being consulted about the issue or proposal,	Current services, potential gaps in services, current and future demand in electronic and paper and face to face meetings	An electronic link to the website to illustrate the look and feel for	Current service, need to change to accommodate growing disease population. Electronic format and via meetings members

and in what format(s)?		the site.	(due to cross infection issues only one patient can attend any meeting).	
Who was asked? (e.g. which patient groups, specific communities, organisations, NHS staff groups)	A wide group of stakeholders involved including: <ul style="list-style-type: none"> • PCT Commissioners, • Secure Services providers both NHS and framework sector • Local Authorities • Other agencies including: • Service Users, families and carers • Service user representatives • Ministry of Justice • Prisons 	A small group was set up made up from: <ul style="list-style-type: none"> Patients NHS Staff within WMSCT Other external NHS staff 	The stakeholders include: <ul style="list-style-type: none"> • Patients, families/carers • Patient representatives • Cystic Fibrosis Trust (because of cross infection issues – only 1 patient can attend at any one time) • Clinicians, managers and other healthcare professionals 	
Summary of feedback (who gave their views, what kind of numbers responded?)	Views were received from service users, in the questionnaires provided, as well as interviews with current service users in secure accommodation. Feedback was both qualitative and quantitative with involvement from numerous stakeholders	The group consisted of: <ul style="list-style-type: none"> 2 patient 1 member of the public Members from WMSCT Members from BEN PCT 1 member of staff from UHCW NHS Trust 	Approximately 30 responses received including 10 patients and carer views, 15 service providers and 5 commissioner represented. Views were triangulated against 22 attendees at a meeting including all stakeholder groups highlighted above.	
Range of views expressed (what did people say?)	The need for better integrated services so that service users do not 'fall between the gaps'. <ul style="list-style-type: none"> ☐ Effective care pathways that deliver seamless experience of care. ☐ Early recognition/intervention of service user need. ☐ Recognition that inpatient services when accessed were good, however service users felt access was often only facilitated via the Criminal Justice System. 'Cries for help go unheard, resulting in offending behaviour in order to access appropriate treatment and care'. ☐ Services closer to home to maintain family links and support; to provide effective and seamless follow-up care; and thus improve patient experience and outcomes. 	<ul style="list-style-type: none"> • Pages look fresh and clear with some observations on content • Easy to use however word 'specialised' used too many times 	Criteria:	Priority
			Improved clinical quality	1
			Development of existing / new services	2
			Better access to services	3
			More effective use of resources	4
			Ease of delivery	5
			Improved environmental quality	6
			Improved strategic fit	6
			Meeting policy imperatives	8
Meeting training, teaching and research needs	9			
What commissioning decision was ultimately made?	Building on the 'Strategy for Forensic Mental Health Services 2001 – 2006' developing a comprehensive range of quality, locally based secure/ forensic services to include the	Not applicable	Recommendation of models of service provision informed by options appraisal.	

	introduction of formal Forensic Liaison Services across the region ensuring effective use of inpatient resources and safe transition to community services.		
How did the feedback from the consultation influence this decision?	Feedback was instrumental in the development of the strategy.	Not applicable	The findings have informed the development of a service specification for cystic fibrosis services and a service development plan looking at a third cystic fibrosis centre for the West Midlands.
How were views from the consultation/engagement taken into account?	Engagement with the many stakeholders and their views were considered by the Reference Group responsible for writing the strategy (see Strategy)	Feedback was used to develop the website	Views informed development of strategy
If there were main issues considered from the feedback that couldn't be acted on, what were they and why not?	Not applicable	Not applicable	Not applicable
Please reference any consultation materials and reports that can be linked to within the annual report	Secure Services Strategy 2010 - 2015	Not applicable	Option appraisal

2. Next 12 months

Please give a brief outline below of any consultations / engagement work planned for the next 12 months (from April 2010 until end of March 2011).

1. Service User Engagement to assist in the development of the CAMHS Tier 4 implementation plan
2. Paediatric Cardiac Surgery engagement
3. Contribution to renal engagement nationally – leading the event focus on QIPP
4. Engagement on organ donation – leading nationally

For more information about Specialised Commissioning in the West Midlands visit www.wmsc.nhs.uk